

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market, Room 2078
Wichita, KS 67202

WELL PLUGGING RECORD
K.A.R.-82-3-117

API NUMBER 15-097-00218-0000

LEASE NAME Pyle

WELL NUMBER 1

 Ft. from S Section Line

 Ft. from E Section Line

SEC. 1 TWP. 28 RGE. 19W (E) or (W)

COUNTY Kiowa

Date Well Completed

Plugging Commenced 6-20-00

Plugging Completed 6-23-00

TYPE OR PRINT
NOTICE: Fill out completely
and return to Coas. Div.
office within 30 days.

LEASE OPERATOR Hillenburg Oil Company

ADDRESS 11600 South Lynn Lane Rd. Broken Arrow, OK. 74011

PHONE (310) 628-4777 OPERATORS LICENSE NO. 5375

Character of Well Oil

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on (date)

by Steve Middleton (KCC District Agent's Name).

Is ACO-1 filed? If not, is well log attached?

Producing Formation Depth to Top Bottom T.D. 4853'

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

7-14-2000
RECEIVED

STATE CORPORATION COMMISSION

Formation	Content	From	To	Size	Put In	Pulled out
				8-5/8"	344'	None
				4-1/2"	4852'	2800'

14 2000

CONSERVATION DIVISION
Wichita, Kansas

Describe in detail the manner in which the well was plugged, indicating where the mud fluid placed and the method or methods used in introducing it into the hole. If cement or other pl were used, state the character of same and depth placed, from feet to feet each s. Plugged off bottom with sand to 4650' and 4 sks. cement, shot pipe @3200', 3000', 2800', pulled up to 1200', pumped 10 sks. gel, 50 sks. cement, pulled up to 370', pumped 50 sks. cement, pulled up to 40' and circulated 10 sks. cement. 60/40 pos. 6% gel. Plugging Complete.

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529

Address P.O. Box 467 Chase, Kansas 67524

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Hillenburg Oil Company

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso (Employee of Operator) or (Operator)

above-described well, being first duly sworn on oath, says: That I have knowledge of the fac statements, and matters herein contained and the log of the above-described well as filed i the same are true and correct, so help me God.

(Signature) [Signature]

(Address) P. O. Box 467 Chase, KS 67524

SUBSCRIBED AND SWORN TO before me this 11th day of July, 2000

[Signature]
Notary Public

My Commission Expires:

IRENE HERZBERG
State of Kansas
My Appt. Exp. Aug. 24, 2001

Form C
Revised 05